FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1											
	(See instructions)					Office use only					
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Exar over	nple: If typyin the lines	ıg, type	12F	E4M5				
CONGRESSIO	DNAL MAJORITY	COMMITTEE								ш	ш
ADDRESS (number and	2000 street)	NORTH ADAMS	STREE	T 	111			ш			
(Check if add	#330	<u> </u>					1 1				
is changed)		ARLINGTON					VA 22201 -				
			CITY			STATI	■		ZIP C	ODE 📥	•
COMMITTEE'S E-MA											1
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			Ш			ш		ш	Ш	ш	
COMMITTEE'S WEE	PAGE ADDRESS (L	IRL)									
						ш		ш		ш	
								ш		ш	
COMMITTEE'S FAX	NUMBER										
با لبنا	سيا لي										
2. DATE M	M / D D / Y	2009									
3. FEC IDENTIFIC	ATION NUMBER		C C00	117721							
4. IS THIS STATE	MENT X NEV	V (N) OR		AMEN	DED (A)						
I certify that I have exam	nined this Statement and	I to the best of my know	vledge an	d belief it is tru	ue, correct a	nd compl	ete				
Type or Print Name of	Trocourer	William Le									
Type of Fillit Name of											
Signature of Treasure	r Electronically File	d by William Le	!			Date	0 1	M /	30	YYY	2 0 [°] 0 9 [°]
NOTE: Submission of fa		nplete information may							2 U.S.C. \$	S437g.	
Office Use Only				For further i Federal Elect Toll Free 800 Local 202-69	tion Commis 0-424-9530			F	EC FC		

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